CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr Kyle NICKNAME LAST McAlister	MI R SUFFIX	OFFICE USE ONLY Date Received Abilene City Secretory
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Charige of Address	ADDRESS / PO BOX; APT / SUITE #: C	CITY: STATE: ZIP CODE	APR 35 2019 Filed for Record
5 CANDIDATE/ OFFICEHOLDER PHONE	(325) 668-5694	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Mrs Shannel NICKNAME LAST Anderson	MI	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SL 1266 Kingsbury Abilene, TX 79		ZIP CODE
8 CAMPAIGN TREASURER PHONE	(325) 665-1262	EXTENSION	
9 REPORT TYPE	January 15 30th day before el		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	03 28 2019	THROUGH 04	Day Year 24 2019
11 ELECTION	ELECTION DATE Month Day Year Primary 5/ 4 / 2019 General	Runolf Other Description Special	
12 OFFICE	OFFICE HELD (If any) Abilene City Council Place 5	13 OFFICE SOUGHT (II known) Abilene City Cound	
	GO ТО	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	McAlister		15 Filer ID (Ethics Commission Filers)	
Kyle McAlister 16 NOTICE FROM POLITICAL COMMITTEE(S) THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME		
	✓ GENERAL	Friends For Kyle McAlister		
	SPECIFIC	COMMITTEE ADDRESS		
		2573 Lincoln, Abilene, TX	79601	
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages	1	Shannel Anderson		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
		1266 Kingsbury, Abilene, TX 79	9602	
17 CONTRIBUTION TOTALS		TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$274.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 949.00			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			
	4. TOTAL POLITICAL EXPENDITURES \$ 2.780, 77			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 5266. 98		\$ 2280,77 DAY \$ 5266.98	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$		THE \$	
18 AFFIDAVIT				
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Notary ID 131287597 Signature of Candidate or Officeholder				
AFFIX NOTARY STAM	P/SEALABOVE			
Sworn to and subscribed before me, by the said Kyle MCAISEN, this the 26th day of April, 20 9, to certify which, witness my hand and seal of office. Shauna Atusca Notam Public				
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of officer/administering cath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME 20 Filer ID (Ethic	s Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 949.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2280,77
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/O	рн \$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE AT

MONE	ATT TOLITIOAL CONTINUOTIONS	SCHEDULE AT		
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Z		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Kyle	McAlister			
4 Date	5 Full name of contributor	7 Amount of contribution (\$)		
3-28-19	Dwayne & Virginia Chitwood 6 Contributor address; City; State; Zip Code 95 Hedges Rd, Abilene, TX 79606	\$100.00		
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See	Instructions)		
Date 3-28-19	Full name of contributor	Amount of contribution (\$)		
	Contributor address: City: State: Zip Code 1281 Canterbury Dr, Abilene, TX 79602	\$100,00		
Principal occup	ation / Job title (See Instructions) Employer (See	Instructions)		
Date	Full name of contributor	Amount of contribution (S)		
4-3-19	4-3-19 S75.00 S75.00 S75.00 S75.00 S75.00			
Principal occup	eation / Job title (See Instructions) Employer (See	Instructions)		
Date	Full name of contributor	Amount of contribution (\$)		
4-8-19	Contributor address; City; State; Zip Code 4620 N 1st, Abilene, TX 79603	\$100.00		
Principal occup	eation / Job title (See Instructions) Employer (See	Instructions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

			JOHEDOLL AT
The	instruction Guide explains how to complete this for	m.	1 Total pages Schedule A1:
2 FILER NAME	McAlister		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state_PAC_(ID#		7 Amount of contribution (\$)
4-5-19	Ray McGlothlin, Jr 6 Contributor address; City; State; 2 PO Box 89, Abilene, TX 79604	Zip Code	\$200.00
8 Principal occu	upation / Job title (See Instructions) 9	Employer (See Instruct	ions)
Date 4-17-19	Full name of contributor		Amount of contribution (\$)
	Contributor address; City; State: 3549 Cedar Run #1509 Abilene, TX		\$100.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor		Amount of contribution (\$)
22	Contributor address; City; State; 2	Zip Code	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor		Amount of contribution (\$)
	Contributor address; City; State; Z		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NE	EDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expenso Focs Food/Beverage Expense Gitl/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Exponso Printing Expense Salaries/Wagos/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Rolated Expense Travel In District Travel Out Of District Other (enter a category not listed above)

The Instruction Guide explains how to complete this form. 2 FILER NAME 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission Filers) Kyle McAlister 4 Date 5 Payee name 4-22-19 Вгаусо 6 Amount (\$) 7 Payee address; City, State, Zip Code \$194.85 3313 S 19th Abilene, TX 79605 (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. PURPOSE Campaign signs Check if Austin, TX, officeholder living expense OF EXPENDITURE Office sought Office held Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Kyle McAlister Abilene City Council Plc 5 Same Payee name 4-2-19 **Double Diamond Signs** Payee address; City; State; Zip Code Amount (\$) 3005 S 1st, Abilene, TX 79605 \$928.68 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas, Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense Campaign signs EXPENDITURE Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Abilene City Council Plc 5 Kyle McAlister Same Payee name 4-16-19 Sonic City; State; Zip Code Amount (\$) Payee address; 3856 S Clack, Abilene, TX 79606 \$5.82 Catogory (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schodule T. PURPOSE Food OF Check If Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Kyle McAlister Abilene City Council Place 5 Same

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Foes Food/Beverage Expense Git/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Exponso Printing Exponso Salaries/Wages/Contract Labor Solicitation/Fundraising Expenso Transportation Equipment & Related Expenso Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Kyle McAlister		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name			
4-14-19	Tractor Supply			
6 Amount (\$)	7 Payee address; City, State, Zip Code			
\$52.26	4450 Southwest Dr Abilene, TX 79	9606		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schodule) Campaign sign supplies		outside of Texas. Comp in, TX, officeholder	
	Candidate / Officeholder name	Office sought		Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Abilene City Cour	ncil Plc 5	Same
	1	7 tbilotio oity ooal	110111100	
Date	Payee name			
4-11-19	Tractor Supply Co.			
Amount (\$)	Payee address; City; State; Zip Code			
\$43.29	2249 State Hwy 351, Abilene, TX 79	601		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign sign supplies	Description Check if Austin, TX, officeholder living expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OI	¹ Kyle McAlister Ab	ilene City Council	Plc 5	Same
Date	Payee name			
4-15-19	Bible Hardware			
Amount (\$)	Payee address; City; State; Zip Code			
\$17.30	333 Walnut, Abilene, TX 79601			
PURPOSE OF EXPENDITURE	Catogory (See Categories listed at the top of this schedule) Campaign sign supplies		utside af Taxas. Comp n, TX, officeholder f	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H Kyle McAlister Abilene City Co	Office sought ouncil Place 5		Office held Same
	ATTACH ADDITIONAL COPIES OF TH	S SCHEDULE AS NE	EDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Foes Food/Beverage Expense Gilt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Exponso Printing Exponso Sataries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Crodit Card Payment	The instruction Guide explains how	to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Kyle McAlister		3 Filer ID (Et	hics Commission Filers)	
4 Date	5 Payee name	· -			
4-16-19	Tractor Supply				
6 Amount (\$)	7 Payee address; City, State, Zip Code				
\$21.60	4450 Southwest Dr Abilene, TX 7	79606			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign sign supplies	Check if travel o	rutside of Texas. Comple In, TX, officeholder liv		
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held	
expenditure to benefit C/O	Kyle McAlister	Abilene City Cou	ncil Plc 5	Same	
Date	Payee name				
4-17-19					
4-17-19	WalMart				
Amount (\$)	Payee address; City; State; Zip Code				
\$61.57	1650 State Hwy 351, Abilene, TX 7	9601			
ΨΟ1.01					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing supplies	Check if travel or	Description Check if travel outside of Texas, Complete Schedule T. Chack if Austin, TX, officaholder living expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held	
expenditure to benefit C/OF	H Kyle McAlister A	bilene City Council	Plc 5	Same	
Date	Payee name				
4-23-19	Facebook				
Amount (\$)	Payee address; City; State; Zip Cod	8			
4.1	1 Hacker Way Menlo Park,	CA 04025			
\$250.00	1 Hacker Way Menlo Park,	UM 34023			
PURPOSE OF EXPENDITURE	Catogory (See Categories listed at the top of this schedule) Campaign ads	Check if travel of	utsida af Taxas. Cample n, TX, officeholder livi		
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name H Kyle McAlister Abilene City C	Office sought ouncil Place 5		Office held Same	
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NE	EDED		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Foes Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expenso Printing Expenso Salaries/Wages/Contract Labor Solicitation/Fundraising Expenso Transportation Equipment & Related Expenso Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Kyle McAlister		3 Filer ID (Ethic	Commission Filers)
4 Date 4-19-19	5 Payee name Double Diamond Signs			-
6 Amount (\$)	7 Payee address; City, State, Zip Code			
\$401.39	3005 S 1st, Abilene, TX 79605			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Signs		utside of Texas. Complete S n, TX, officeholder living	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Kyle McAlister	Office sought Abilene City Cour	ncil Plc 5	Office held Same
Date	Рауее пате			
4-22-19	Bosses Pizza	_		
Amount (\$)	Payee address; City; State; Zip Code			
\$54.01	2801 S 1st, Abilene, TX 79603			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		tside of Texas. Complete So , TX, officeholder living	
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OF	Kyle McAlister Abil	ene City Council	Plc 5	Same
Date	Payee name			
4-22-19	Facebook			
Amount (\$)	Payee address; City; State; Zip Code			
\$250.00	1 Hacker Way Menlo Park, CA	94025		
PURPOSE OF EXPENDITURE	Catogory (See Categories fisted at the top of this schedule) Campaign ads		iside of Texas. Complete Sc . TX, officeholder living (
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Kyle McAlister Abilene City Cour	Office sought ncil Place 5		Office held Same
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	